

Request for Civil Harassment Restraining Order

Information about You:

Full Name (First, Middle, and Last): _____

Street Address: _____

City: _____ State: ____ Zip: _____

Telephone No.: _____

Male: ____ Female: ____

Date of Birth: _____

Information about the Restrained Person:

Name: _____

Street Address: _____

City: _____ State: ____ Zip Code: _____

Male: ____ Female: ____

Height: Feet: ____ Inch: ____

Weight: (in pounds) _____

Race: _____

Hair Color: _____

Eye Color: _____

Work Address: _____

BIRTH DATE: _____

APPROXIMATE AGE: _____

Household and Family Members Who Also Need Protection:

Name:	Sex:	Age:	Lives With You?	How Related to You?
_____	_____	_____	Yes: ____ No: ____	_____
_____	_____	_____	Yes: ____ No: ____	_____
_____	_____	_____	Yes: ____ No: ____	_____
_____	_____	_____	Yes: ____ No: ____	_____

In addition to you, how many members of your family (and others living in your household) need protection from

0 ____

1 ____

2 ____

3 ____

4 ____

County of Ventura - Law Enforcement Agencies

Camarillo Police Department 3701 E. Las Posas Road, Camarillo 93010

East County Sheriff's Department 2101 E. Olsen Road, Thousand Oaks 91360

Fillmore Police Department 524 Sespe Ave., Fillmore 93015

Moorpark Police Department 610 Spring Road, Moorpark 93012

Ojai Police Department 402 S. Ventura Road, Ojai 93023

Oxnard Police Department 251 South "C" Street, Oxnard 93030

Port Hueneme Police Department 250 N. Ventura Road, Port Hueneme 93041

Santa Paula Police Department 214 S. 10th Street, Santa Paula 93060

Simi Valley Police Department 3800 Alamo St., Simi Valley 93063

Thousand Oaks Police Department 2101 E. Olsen Road, Thousand Oaks 91360

Ventura County Sheriff's Department 800 South Victoria Ave, Ventura 93006

Ventura Police Department 1425 Dowell Drive, Ventura 93003

What law enforcement agencies do you want to receive your order?

Agency Name: _____

Street Address: _____

City: _____ State: ____ Zip Code: _____

Agency Name: _____

Street Address: _____

City: _____ State: ____ Zip Code: _____

Agency Name: _____

Street Address: _____

City: _____ State: ____ Zip Code: _____

Agency Name: _____

Street Address: _____

City: _____ State: ____ Zip Code: _____

What courthouse do you want to go to?

_____ **Ventura Courthouse**

800 South Victoria Avenue
Ventura, CA 93009

_____ **Simi Valley – East County Courthouse**

3855-F Alamo Street
Simi Valley, CA 93063

**Notice of Hearing and
Temporary Restraining Order**

Clerk stamps date here when form is filed.

1 Name of person asking for protection:

Address (skip this if you have a lawyer): (If you want your address to be private, give a mailing address instead):

City: _____ State: _____ Zip: _____

Your telephone number (optional): (_____) _____

Your lawyer (if you have one): (Name, address, telephone number, and State Bar number): _____

Fill in court name and street address:

Superior Court of California, County of**2** Name of person to be restrained:

Description of that person:

Court fills in case number when form is filed.

Case Number:Sex: ☐ M ☐ F Height: _____ Weight: _____ Race: _____

Hair Color: _____ Eye Color: _____ Age: _____ Date of Birth: _____

Home Address (if known): _____

City: _____ State: _____ Zip: _____

Work Address (if known): _____

City: _____ State: _____ Zip: _____

To the person in ②:**3 Notice of Hearing****A court hearing is scheduled on the request for orders against you to stop harassment:**

Name and address of court if different from above:

**Hearing
Date** →

Date: _____ Time: _____

Dept.: _____ Rm.: _____

If you do not want the court to make orders against you, file Form CH-110. Then go to the hearing and tell the court why you disagree. You may bring witnesses and other evidence. If you do not go to this hearing, the court may make restraining orders against you that could last up to 3 years.

4 Court Orders

The court (check a or b):

- a. ☐ Has scheduled the hearing stated in ③. No orders are issued against you at this time.
- b. ☐ Has scheduled the hearing stated in ③ **and** has issued the temporary orders against you specified on page 2. If you do not obey these orders, you can be arrested and charged with a crime. And you may have to go to jail, pay a fine of up to \$1,000, or both.

This is a Court Order.

Your name: _____

Temporary Orders Against the Restrained Person

(Write the name of the person in ②): _____

The court has made the temporary orders indicated below against you. You must obey all these orders. These orders will expire on the date of the hearing listed in ③ unless they are extended by the court.

5 ☐ Personal Conduct OrdersYou must **not** do the following things to the people listed in ① and ⑩:

- ☐ a. Harass, attack, strike, threaten, assault (sexually or otherwise), hit, follow, stalk, destroy personal property, keep under surveillance, or block movements.
- ☐ b. Contact (directly or indirectly), telephone, send messages, mail, or e-mail.
- ☐ c. Take any action, directly or through others, to obtain the addresses or locations of the persons in ① and ⑩. (If item c is not checked, the court has found good cause not to make this order.)

Peaceful written contact through a lawyer or a process server or other person for service of legal papers related to a court case is allowed and does not violate this Order.

6 ☐ Stay-Away OrderYou **must** stay at least (specify): _____ yards away from:

- | | | |
|--|---|---|
| a. <input type="checkbox"/> The person listed in ① | e. <input type="checkbox"/> Vehicle of person in ① | <input type="checkbox"/> Vehicles of persons in ⑩ |
| b. <input type="checkbox"/> The people listed in ⑩ | f. <input type="checkbox"/> The protected children's school or child care | |
| c. <input type="checkbox"/> The home of the persons in ① and ⑩ | g. <input type="checkbox"/> Other (specify): _____ | |
| d. <input type="checkbox"/> Jobs or workplaces of the persons in ① and ⑩ | _____ | |

This stay-away order does not prevent the person in ② from going to or from that person's home or place of employment.

7 ☐ No Guns or Other Firearms

You cannot own, possess, have, buy or try to buy, receive or try to receive, or in any other way get a gun or firearm.

8 ☐ Turn In or Sell Guns or Firearms

You must:

- Sell to a licensed gun dealer or turn in to police any guns or firearms that you possess or control. This must be done within 24 hours of being served with this order.
- File a receipt with the court within 48 hours of receiving this order that proves guns have been turned in or sold. (You may use Form CH-145 for this.)

9 ☐ Other Orders (specify): _____

This is a Court Order.

Your name: _____

10 ☐ **Other Protected Persons**

List of the full names of all family or household members protected by these orders:

Instructions for the Protected Person**To the person in ①:** (*Write the name of the person in ①:*) _____**11** **Service of Order on Law Enforcement**

If the court issues temporary restraining orders, by the close of business on the date the orders are made, you or your lawyer should deliver a copy of this Order and any proof of service forms to each law enforcement agency listed below.

Name of Law Enforcement Agency:

Address (City, State, Zip)

_____	_____
_____	_____
_____	_____

12 **Service of Documents**

You must have someone personally deliver to the person in ② a copy of all the documents checked below:

- a. ☐ CH-120, *Notice of Hearing and Temporary Restraining Order (CLETS)* (completed and file-stamped)
- b. ☐ CH-100, *Request for Orders to Stop Harassment* (completed and file-stamped)
- c. ☐ CH-110, *Answer to Request for Orders to Stop Harassment* (blank form)
- d. ☐ CH-145, *Proof of Firearms Turned In or Sold* (blank form)
- e. ☐ CH-151, *How Can I Answer a Request for Orders to Stop Harassment?*
- f. ☐ Other (*specify*): _____

You must file with the court before the hearing a proof of service of these documents on the person in ②.

13 **Time for Service** (*check a, b, or c*)

- a. ☐ A copy of the documents listed in ⑫ must be served in person to the person in ② at least 5 days before the hearing.
- b. ☐ A copy of the documents listed in ⑫ must be served in person to the person in ② at least 2 days before the hearing.
- c. ☐ A copy of the documents listed in ⑫ must be served in person to the person in ② at least _____ days before the hearing.

14 ☐ **No Fee for Filing**

Filing fees are waived.

This is a Court Order.

Your name: _____

15 ☐ **No Fee for Service of Order by Law Enforcement**

The sheriff or marshal will serve this Order without charge because:

- a. ☐ The Order is based on stalking.
- b. ☐ The Order is based on a credible threat of violence.
- c. ☐ The person in ① is entitled to a fee waiver.

Date: _____

_____
*Judicial Officer***Warnings and Notices to the Restrained Person in ②****You Cannot Have Guns or Firearms**

You cannot own, have, possess, buy or try to buy, receive or try to receive, or otherwise get a gun while this Order is in effect. If you do, you can go to jail and pay a \$1,000 fine. You must sell to a licensed gun dealer or turn in to police any guns or firearms that you have or control in accordance with item ⑧ above. The court will require you to prove that you did so. If you do not obey this Order, you can be charged with a crime.

Instructions for Law Enforcement

This Order is effective when made. It is enforceable anywhere in all 50 states, the District of Columbia, all tribal lands, and all U.S. territories and shall be enforced as if it were an order of that jurisdiction by any law enforcement agency that has received the Order, is shown a copy of the Order, or has verified its existence on the California Law Enforcement Telecommunications System (CLETS). If the law enforcement agency has not received proof of service on the restrained person, and the restrained person was not present at the court hearing, the agency shall advise the restrained person of the terms of the Order and then shall enforce it. Violations of this Order are subject to criminal penalties.

**Requests for Accommodations**

Assistive listening systems, computer-assisted real-time captioning, or sign language interpreter services are available if you ask at least 5 days before the hearing. Contact the clerk's office or go to www.courtinfo.ca.gov/forms for *Request for Accommodations by Persons With Disabilities and Order* (Form MC-410). (Civil Code, § 54.8.)

*(Clerk will fill out this part.)***—Clerk's Certificate—**

Clerk's Certificate
[seal]

I certify that this *Notice of Hearing and Temporary Restraining Order* is a true and correct copy of the original on file in the court.

Date: _____ Clerk, by _____, Deputy

This is a Court Order.

Clerk stamps date here when form is filed.

① Your name (*person asking for protection*):Your address (*skip this if you have a lawyer*): (*If you want your address to be private, give a mailing address instead*):

City: _____ State: _____ Zip: _____

Your telephone number (*optional*): (_____) _____Your lawyer (*if you have one*): (*Name, address, telephone number, and State Bar number*):

Fill in court name and street address:

Superior Court of California, County of _____

Court fills in case number when form is filed.

Case Number: _____

② Name of person you want protection from:

Describe the person: Sex: ☐ M ☐ F Weight: _____

Height: _____ Race: _____ Hair Color: _____

Eye Color: _____ Age: _____ Date of Birth: _____

Home Address (*if you know*): _____

City: _____ State: _____ Zip: _____

Work Address (*if you know*): _____

City: _____ State: _____ Zip: _____

③ Besides you, who needs protection? (*Family or household members*)

Full Name	Sex	Age	Lives with you?	How are they related to you?
_____	_____	_____	<input type="checkbox"/> Yes <input type="checkbox"/> No	_____
_____	_____	_____	<input type="checkbox"/> Yes <input type="checkbox"/> No	_____
_____	_____	_____	<input type="checkbox"/> Yes <input type="checkbox"/> No	_____
_____	_____	_____	<input type="checkbox"/> Yes <input type="checkbox"/> No	_____

☐ Check here if you need more space. Attach a sheet of paper and write "CH-100, item 3—Describe Protected Persons" at the top of the page.④ Why are you filing in this court? (*Check all that apply*):☐ The person in ② lives in this county.☐ I was hurt (physically or emotionally) by the person in ② here.☐ Other (*specify*): _____⑤ How do you know the person in ②? (*Describe*):

This is not a Court Order.



Your name: _____

6 Describe how the person in **②** has harassed you:

a. Date of most recent harassment: _____

b. Who was there? _____
_____c. Did the person in **②** commit any acts of violence or threaten to commit any acts of violence against you?☐ Yes ☐ NoIf yes, describe those acts or threats: _____

_____d. Did the person in **②** engage in a course of conduct that harassed you and caused substantial emotional distress? ☐ Yes ☐ NoIf yes, describe: _____

_____e. Did the conduct of the person in **②** described above seriously alarm, annoy, or harass you? ☐ Yes ☐ No☐ Check here if you need more space. Attach a sheet of paper and write "CH-100, item 6—Describe Harassment" at the top of the page.**Check the orders you want ☒****7 ☐ Personal Conduct Orders**I ask the court to order the person in **②** to **not** do the following things to me or anyone listed in **③**:a. ☐ Harass, attack, strike, threaten, assault (sexually or otherwise), hit, follow, stalk, destroy personal property, keep under surveillance, or block movements.b. ☐ Contact (either directly or indirectly), or telephone, or send messages or mail or e-mail.The person in **②** will also be ordered not to take any action to get the addresses or locations of any protected persons, their family members, or their caretakers unless the court finds good cause not to make the order.**8 ☐ Stay-Away Orders**I ask the court to order the person in **②** to stay at least (*specify*): _____ yards away from me and the people listed in **③** and the places listed below: (*Check all that apply*):a. ☐ My homed. ☐ My vehicleb. ☐ My job or workplacee. ☐ Other (*specify*): _____c. ☐ My children's school or child care _____
_____If the court orders the person in **②** to stay away from all the places listed above, will that person still be able to get to his or her home, school, or job? ☐ Yes ☐ NoIf no, explain: _____

_____**This is not a Court Order.**

Your name: _____

9 ☐ Others to Be Protected

Should the other people listed in ③ also be covered by the orders described above?

☐ Yes ☐ No ☐ Does not apply

If yes, explain: _____

10 ☐ Order About Guns or Other Firearms

I ask the court to order the person in ② to be prohibited from owning, possessing, purchasing, or receiving, or attempting to purchase or receive firearms **and** to sell or turn in any guns or firearms that he or she controls.

11 ☐ Other Orders

I ask the court to order the person in ② to (specify): _____

12 ☐ Temporary Orders

Do you want the court to make orders now on the matters listed in ⑦, through ⑪ that will last until the hearing? ☐ Yes ☐ No

If yes, explain why you need these orders right now: _____

☐ Check here if you need more space. Attach a sheet of paper and write “CH-100, item 12—Temporary Orders” at the top of the page.

13 ☐ Delivery of Orders to Law Enforcement

My lawyer or I will give copies of the orders to the following law enforcement agencies:

a. Name of Agency: _____

Address: _____

City: _____ State: _____ Zip: _____

b. Name of Agency: _____

Address: _____

City: _____ State: _____ Zip: _____

14 ☐ Other Court CasesHave you ever asked any court for other restraining orders against the person in ②? ☐ Yes ☐ No

If yes, specify the counties and case numbers if you know them: _____

This is not a Court Order.

Your name: _____

15 ☐ **Time for Service**

You must have your papers personally served on (notify) the person in ② at least 5 days before the hearing, unless the court orders a different time for service. (*Form CH-135 explains "What Is Proof of Service?" Form CH-130 may be used to show the court that the papers have been served.*) If your papers cannot be served at least 5 days before the hearing and you need more time, explain why:

16 ☐ **No Fee for Filing**

I ask the court to waive the filing fee because the person in ② has used or threatened to use violence against me, has stalked me, or has acted or spoken in some other way that makes me reasonably fear violence. I am asking for a restraining order to stop this conduct.

17 ☐ **No Fee to Serve Orders**

I ask the court to order the sheriff or marshal to serve (notify) the person in ② about the orders for free because:

- a. ☐ My request for orders is based on stalking; or
- b. ☐ My request for orders is based on a credible threat of violence; or
- c. ☐ I am entitled to a fee waiver.

(If you are requesting free service of the orders based on a fee waiver, you must complete and file the Application for Waiver of Court Fees and Costs (Form FW-001).)

18 ☐ **Lawyer's Fees and Costs**

I ask the court to order payment of my:

- a. ☐ Lawyer's fees
- b. ☐ Out-of-pocket expenses

The amounts requested are:

<u>Item</u>	<u>Amount</u>	<u>Item</u>	<u>Amount</u>
_____	\$ _____	_____	\$ _____
_____	\$ _____	_____	\$ _____
_____	\$ _____	_____	\$ _____

- ☐ Check here if you need more space. Attach a sheet of paper and write "CH-100, item 18—Lawyer's Fees and Costs" at the top of the page.

19 **Additional Relief**

I ask the court for additional relief as may be proper.

20 Number of pages attached to this form, if any: _____

Date: _____

Lawyer's name

► _____
Lawyer's signature

I declare under penalty of perjury under the laws of the State of California that the information above and on all attachments is true and correct.

Date: _____

Type or print your name

► _____
Sign your name

This is not a Court Order.

Clerk stamps date here when form is filed.

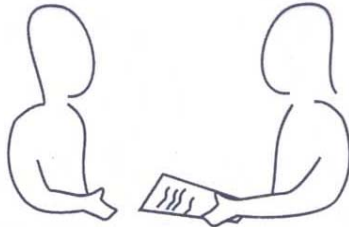
① Name of person asking for protection:

② Name of person you want protection from:

③ **Notice to Server**

The server must:

- Be over 18 years of age.
- Not be listed on the restraining order.
- Give a copy of all documents checked in ④ to the person in ②. (You cannot send them by mail.) Then complete and sign this form, and give or mail it to the person in ①.



Fill in court name and street address:

Superior Court of California, County of

Fill in case number:

Case Number:

PROOF OF PERSONAL SERVICE

④ I gave the person in ② a copy of the documents checked below:

- a. ☐ CH-120, *Notice of Hearing and Temporary Restraining Order (CLETS)*
- b. ☐ CH-100, *Request for Orders to Stop Harassment*
- c. ☐ CH-110, *Answer to Request for Orders to Stop Harassment* (blank form)
- d. ☐ CH-145, *Proof of Firearms Turned In or Sold* (blank form)
- e. ☐ CH-151, *How Can I Answer a Request for Orders to Stop Harassment?*
- f. ☐ CH-140, *Restraining Order After Hearing to Stop Harassment*
- g. ☐ Other (*specify*): _____

⑤ I personally gave copies of the documents checked above to the person in ② :

a. On (*date*): _____ b. At (*time*): _____ ☐ a.m. ☐ p.m.

c. At this Address: _____

City: _____ State: _____ Zip: _____

⑥ **Server's Information**

Name: _____

Address: _____

City: _____ State: _____ Zip: _____

Telephone: _____

(If you are a registered process server):

County of registration: _____ Registration number: _____

I declare under penalty of perjury under the laws of the State of California that the information above is true and correct.

Date: _____

Type or print server's name

Server to sign here

**Restraining Order After Hearing
to Stop Harassment***Clerk stamps date here when form is filed.***1** Your name (*person asking for protection*):Your address (*skip this if you have a lawyer*): (*If you want your address to be private, give a mailing address instead*):

City: _____ State: _____ Zip: _____

Your telephone (*optional*): (_____) _____Your lawyer (*if you have one*): (*Name, address, telephone number, and State Bar number*): _____**2** Name of person to be restrained:*Fill in court name and street address:***Superior Court of California, County of***Fill in case number:***Case Number:**

Description:

Sex: ☐ M ☐ F Height: _____ Weight: _____ Race: _____

Hair Color: _____ Eye Color: _____ Age: _____ Date of Birth: _____

3 **Hearing**

There was a hearing:

on (*date*): _____ at (*time*): _____ ☐ a.m. ☐ p.m. Dept.: _____ Rm: __________ made the orders at the hearing.
(*Name of judicial officer*)

These people were at the hearing:

a. ☐ Plaintiff (*the person in ①*) c. ☐ Plaintiff's lawyer (*name*): _____b. ☐ Defendant (*the person in ②*) d. ☐ Defendant's lawyer (*name*): _____**4** **This Is a Court Order**

You must obey all the orders indicated below. If you do not obey this Order, you can be arrested and charged with a crime. And you may have to go to jail, pay a fine of up to \$1,000, or both.

5 **Expiration Date**

This Order, except for an award of lawyer's fees, expires at:

(*time*): _____ ☐ a.m. ☐ p.m. or ☐ midnight on (*date*): _____

If no date is present, this Order expires three years from the date of issuance.

This is a Court Order.

Your name: _____

6 ☐ **Personal Conduct Orders**You must ***not*** do the following things to the people listed in ① and ⑪:

- a. ☐ Harass, attack, strike, threaten, assault (sexually or otherwise), hit, follow, stalk, destroy personal property, keep under surveillance, or block movements.
- b. ☐ Contact (directly or indirectly), telephone, send messages, mail, or e-mail.
- c. ☐ Take any action, directly or through others, to obtain the addresses or locations of the persons in ① and ⑪. *(If item c is not checked, the court has found good cause not to make this order.)*

Peaceful written contact through a lawyer or a process server or other person for service of legal papers related to a court case does not violate these orders.

7 ☐ **Stay-Away Order**You must stay at least (*specify*): _____ yards away from:

- a. ☐ The person listed in ①
- b. ☐ The people listed in ⑪
- c. ☐ The home of the persons in ① and ⑪
- d. ☐ Jobs or workplaces of the persons in ① and ⑪
- e. ☐ Vehicle of person in ①
- f. ☐ The protected children's school or child care
- g. ☐ Other (*specify*): _____

This stay-away order does not prevent the person in ② from going to or from that person's home or place of work.

8 ☐ **No Guns or Other Firearms**

You cannot own, possess, have, buy or try to buy, receive or try to receive, or in any other way get a gun or firearm.

9 ☐ **Turn In or Sell Guns or Firearms**

You must:

- Sell to a licensed gun dealer or turn in to police any guns or firearms that you possess or control. This must be done within 24 hours of being served with this order.
- File a receipt with the court within 48 hours of receiving this order that proves guns have been turned in or sold. *(You may use CH-145 for this.)*

10 ☐ **Other Orders** (*specify*): _____

11 ☐ **Other Protected Persons**

List of the full names of all family and household members protected by these orders:

This is a Court Order.

Your name: _____

Instructions for the Protected Person**To the person in ①** (Write the name of the person in ①): _____**12 ☐ Delivery to Law Enforcement**

If the court issues restraining orders, by the close of business on the date this Order is made, you or your attorney must deliver a copy of this Order and any proof of service forms to each law enforcement agency listed below:

Name of Law Enforcement Agency: _____

Address (City, State, Zip) _____

_____**13 ☐ No Fee for Service of Order by Law Enforcement**

The sheriff or marshal will serve this Order without charge because:

- a. ☐ The Order is based on stalking.
b. ☐ The Order is based on a credible threat of violence.
c. ☐ The person in ① is entitled to a fee waiver.

Date: _____

▶

Judicial Officer

Warnings and Notices to the Restrained Person in ②**You Cannot Have Guns or Firearms**

You cannot own, have, possess, buy or try to buy, receive or try to receive, or otherwise get a gun while this Order is in effect. If you do, you can go to jail and pay a \$1,000 fine. You must sell to a licensed gun dealer or turn in to police any guns or firearms that you have or control in accordance with item ⑨ above. The court will require you to prove that you did so. If you do not obey this Order, you can be charged with a crime.

Instructions for Law Enforcement

This Order is effective when made. It is enforceable anywhere in all 50 states, the District of Columbia, all tribal lands, and all U.S. territories and shall be enforced as if it were an Order of that jurisdiction by any law enforcement agency that has received the Order, is shown a copy of the Order, or has verified its existence on the California Law Enforcement Telecommunications System (CLETS). If the law enforcement agency has not received proof of service on the restrained person, and the restrained person was not present at the court hearing, the agency shall advise the restrained person of the terms of the Order and then shall enforce it. Violations of this restraining order are subject to criminal penalties.

(Clerk will fill out this part)

Clerk's Certificate

Clerk's Certificate
[seal]

I certify that this *Restraining Order After Hearing to Stop Harassment (CLETS)* is a true and correct copy of the original on file in the court.

Date: _____ Clerk, by _____, Deputy

This is a Court Order.

California Law Enforcement Telecommunications System (CLETS) Information Form

Important Notice: This form **MUST NOT** become part of the public court file. It is confidential and private. If the court issues a restraining order, this form will provide law enforcement with information that will assist them in enforcing a restraining order.

Person to Be Protected: Fill out this form as much as you can, and give it to the court clerk. The clerk will provide the confidential information on this form to CLETS, a statewide system that lets police know about your order. In addition to providing the information on this form, you must provide a public mailing address on your request for a restraining order filed with the court. This will allow the court to contact you if needed and allow the other side to have their response to your petition served on you. If you want to keep your place of residence confidential, you can use a post office box or "in care of" address on the request that you file.

Case number for your restraining order (if you know it): _____

1 Person to Be Protected (name): _____

Sex: ☐ M ☐ F Height: _____ Weight: _____ Race: _____

Hair Color: _____ Eye Color: _____ Age: _____ Date of Birth: _____

(mailing address listed on restraining order) (city, state, zip) (telephone number [optional])

Vehicle (type, model, year): _____

Vehicle license number and state: _____

2 Person to Be Restrained (name): _____

Sex: ☐ M ☐ F Height: _____ Weight: _____ Race: _____

Hair Color: _____ Eye Color: _____ Age: _____ Date of Birth: _____

(residence address) (city, state, zip) (telephone number)

(work place) (occupation/title) (work hours)

(business address) (city, state, zip) (telephone number)

Driver's license number and state: _____ Vehicle license number and state: _____

Vehicle (type, model, year): _____

Social Security Number: _____

Describe any marks, scars, or tattoos: _____

Other names used by the restrained person: _____

Describe any guns or firearms you believe the restrained person owns or has access to (number, types, and locations): _____

3 Other People to Be Protected

Name

Date of Birth

Sex

Race

This is not a Court Order—Do not file in court file.

ATTORNEY OR PARTY WITHOUT ATTORNEY (Name and Address)	Telephone Number	FOR COURT USE ONLY
E-MAIL ADDRESS		
ATTORNEY FOR (Name):		
SUPERIOR COURT OF CALIFORNIA, COUNTY OF VENTURA 800 SOUTH VICTORIA AVE. VENTURA, CA 93009 3855 – F ALAMO ST. SIMI VALLEY, CA 93063-2110		
PLAINTIFF/PETITIONER		
DEFENDANT/RESPONDENT		
DECLARATION FOR COURT ASSIGNMENT (Family Law and Unlawful Detainer and all other General actions ONLY)		CASE NUMBER:

Family Law, Domestic Violence, Paternity, Harassment, Unlawful Detainer, and all other General Civil actions presented for filing MUST be accompanied by this declaration.

The undersigned declares that the above entitled matter is filed for proceedings in the:

East County Division, 3855 – F Alamo St., Simi Valley, Ca 93063 (Based upon Zip Code designation.)

91301	91302	91304	91307	91360	91361 (Family Law Only)
91362	91377	93020	93021	93062	93063
93064	93065	91363			

Ventura Division, 800 S. Victoria Ave., Ventura, Ca 93009 (Venue does NOT fall within the Zip Codes above but is within Ventura County .

For the checked reason:

Contract	Performance in the division is expressly provided for
Equity	The cause of action arose within the division
Eminent Domain	The property is located within the division
Family Law	Plaintiff, defendant, petitioner or respondent resides within the division
Harassment	Plaintiff, defendant, petitioner or respondent resides within the division
Mandate	The defendant functions wholly within the division
Name Change	The petitioner resides within the division
Paternity	Plaintiff, defendant, petitioner or respondent resides within the division
Personal Injury	The injury occurred within the division or the defendant resides within the division
Personal Property	The property is located within the division or the defendant resides within the division
Prohibition	The defendant functions wholly within the division
Review	The defendant functions wholly within the division
Title to Real Property	The property is located within the division
Unlawful Detainer	The property is located within the division
Domestic Violence	Plaintiff, defendant, petitioner or respondent resides with the division
Civil not otherwise specified	

(Venue Rule Applicable)

The address of the accident, performance, party, detention, place of business, or other factor which qualifies this case for filing in the division:

Name: _____ Address: _____

Upon information and belief, I declare under penalty of perjury under the laws of the State of California that the foregoing is true and correct.

Date: _____

Signature of Attorney/Party

DECLARATION FOR COURT ASSIGNMENT

ATTORNEY OR PARTY WITHOUT ATTORNEY (Name and Address)	Telephone Number	FOR COURT USE ONLY
ATTORNEY FOR (Name):		
SUPERIOR COURT OF CALIFORNIA, COUNTY OF VENTURA 800 SOUTH VICTORIA AVE. VENTURA, CA 93009 3855 – F ALAMO ST. SIMI VALLEY, CA 93063-2110		
PLAINTIFF/PETITIONER DEFENDANT/RESPONDENT		
DECLARATION RE EX PARTE NOTICE Dom. Violence Restraining Order Civil Harassment Restraining order Custody / Other		CASE NUMBER:

1. I informed the other party in this action that an emergency order would be sought as follows:

Person informed: (Name) _____ Date and time informed: _____

How Informed:

By telephone to the _____ party attorney at (Telephone Number) _____

By leaving a message with (Name) _____ at (Telephone Number) _____
 relationship to party: _____

By leaving a message on voicemail of the party at (Telephone Number) _____

By personally informing:

the party

another person (name) _____ Relationship to party: _____

Other: _____

2. I informed the person listed above that an order would be sought in the Superior Court of Ventura County at

800 South Victoria Ave., Ventura

3855-F Alamo St., Simi Valley on:

Date: _____ **Time:** _____ **Courtroom:** _____

3. I told him/her that the orders requested included, but were not limited to:

Domestic Violence Restraining Orders with _____ move-out orders _____ custody orders _____

Civil Harassment Restraining Orders

Custody / visitation orders, specifically: _____

Other _____

and that he/she should appear at the above time and place if he/she wished to be heard by the court.

I declare under penalty of perjury under the laws of the State of California that the foregoing is true and correct.

Dated: _____

 Signature of Declarant

DECLARATION RE: EX PARTE NOTICE - NO NOTICE GIVEN

Dom. Violence Restraining Order

Civil Harassment Restraining order

Custody / Other

Instructions: Notice must be given for all Ex Parte requests unless the person requesting the order can establish exceptional circumstances to excuse notice.

1. I, _____, am requesting Ex Parte orders as stated below. I am requesting that notice be excused in this matter.

2. Ex Parte hearing is set at **800 South Victoria Ave., Ventura**
3855-F Alamo St , Simi Valley

on: Date: _____ **Time:** _____ **Courtroom:** _____

3. I am requesting the following orders:

Domestic Violence Restraining Orders with _____ move-out orders _____ custody orders

Civil Harassment Restraining Orders

Custody / visitation orders, specifically: _____

Other _____

4. Notice should be excused because (provide details as to why the other party should not be told, in advance, of your request for emergency orders)

I do not have any way to give notice to the other party because: _____

If notice is given, I, or the children, will suffer immediate harm, specifically: _____

Giving notice would frustrate the purpose of this order because: _____

I declare under penalty of perjury under the laws of the State of California that the foregoing is true and correct.

Dated: _____

Signature of Declarant